Express Mail* mailing	label number	ECOIS	517J-247	۔د
-----------------------	--------------	-------	----------	----

Date of D	Deposit

-11-0		
	 PTO/SB/01 (6-95))

Type	-	nhue	cian	4	incido	thic	hov	Г

Approved for use through: 10/31/98 OMB 0651-0032

ype a plus sign (+) inside th	is box →	Patent and Trademan	K Office; U.S. DEP	ARTMENT OF COMMER								
0010/PTO Rev. 6/95	U.S. Department of Commerce Patent and Trademark Office	Attorney Docket	Attorney Docket H 3757 PCT/US									
DECLARA	ATION FOR	First Named Inventor	Majolo, Mart	in								
UTILITY C	OR DESIGN	COMPLETE IF KNOWN										
PATENT AI	PPLICATION	Application Number	,									
		Filing Date										
X Declaration Submitted	OR Declaration Submitted after	Group Art Unit										
with Initial Filing	Initial Filing	Examiner Name										
! believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: DISPERSIONS OF SILYL-TERMINATED POLYMERS WITH A HIGH SOLIDS CONTENT, THEIR PRODUCTION AND THEIR USE (Title of the Invention) the specification of which is attached hereto OR was filed on (MM/DD/YYYY) 12/3/1999 as United States Application Number or PCT International												
amendment specifically referred to	and understand the contents of the ab	·										
I hereby claim foreign priority bene certificate, or 3365(a) of any PCT li and have also identified below, by having a filing date before that of the control of the contro	fits under Title 35, United States Code international application which designat checking the box, any foreign application ne application on which priority is claim	⇒119(a)-(d) or ⇒365(b) of any for ted at least one country other that on for patent or inventor's certificated.	eign application(s) for in the United States of cate, or of any PCT Int	patent or inventor's f America, listed below temational application								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority (Not Claimed	Certified Copy Attached? YES NO								
198 58 908.5	Germany	12/11/1998		X								
	numbers are listed on a supplemental (
· · · · · · · · · · · · · · · · · · ·	le 35, United States Code 3119(e) of a	·	ication(s) listed below ditional provisional	<u>. </u>								
Application Number(s)	Filing Date (MM/DD/YYYY)	app are sup	olication numbers Isted on a oplemental priority set attached hereto.									

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

DOES/GIVENILL





DECLARATION

Pag 2

I hereby claim the benefit under Title 35, United States Code \$120 of any United States application(s), or \$365© of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code \$112.1 acknowledge the duty
to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations >1.56 which became available between the
filing date of the prior application and the national or PCT international filing date of this application.

to disclose inform filing date of the p	nation which	ch is material t	to patentab	oility as defi	fined in 1	Title 37,	', Code of F	ederal F	Regulations	ited States Co 3 31.56 which	ode ∍112.1 acl became availa	knowleage t able betwee	n the
U.S. F Application	Parent	nher		T Pare		\Box		t Filin /DD/Y	ng Date	Pa	rent Pate (if appli		per
Cipponia	711 11		PCT/EF				12/3/19		,		(" wrr	<i></i>	
		T internationa											
As a named inver Trademark Office	ntor, I here connecte	eby appoint the differential the	e following	attomey(s) and/or	agent(s) to prose	cute this	application	n and to trans	act all busines	s in the Pat	ent and
Firm Name									stomer mber	or label			
OR X List Attorney(s) and/or agent(s) name and registration number below:													
	Name)		Regist Nun	tration nber				Name	e		Regist Num	ration iber
Wayne C. Ja Glenn E. J. I Stephen D. Kimberly R.		21,06 33,53 33,24 39,22	3										
Additional at	ttorney(s)	and/or agent(s	s) named o	n a supple	mental r	sheet a	ttached he	reto.					
Please direct all c	correspond	dence X	Customer Number	ork	abel	T .	004	123		OR [Fill in con	respondence below	e
Name	<u>+</u> -	en D. Harp											
Address		el Corporat		2 11 01									
Address	.	Renaissan	ce Biva,	Suite 20)0	T 64,					T _{Zin}	T 19406	
City	Gulph	Milis	Telepho	one	T 610	Sta 0-278-	l	PA	Fa		Zip 19406 610-278-6548		
I hereby declinformation arwillful false stritle 18 of the or any patent	lare that nd belief tatement United	f are believ ts and the l States Co	ents mad ved to be like so m	de herei true; ar	n of m	ny owr ther the	n knowle nat these e by fine	stater or imp	re true ai ments we prisonme	ind that all ere made v ent, or both	statements with the known, under Sec	s made or owledge t ction 100	that 1 of
Name of So	le or F	irst Inver	itor:						A petitio	n has been fil	led for this uns	igned inven	tor
Given Name	Martin	-		Middle Initial			Family Name	Ma	ajolo			Suffix e.g. Jr.	
Inventor's Signature	Ü	les?	Ků.	e	l af	Q				Date	April	18, 2	2001
Residence: City	y Erke	lenz		State	Ge	;r	Countr	y Gr	ermany (DEX	Citizenship	Germ	any
Post Office Add	Iress	St. Martinu	s-Str. 33						····				
Post Office Add	tress												
City 41812 E	Erkelenz		State		Zip		Cor	untry	German	ıy	Applicant Authority		
× Addition	nal invent	tors are bein	g named	on suppl	ementa	al shee	et(s) attac	hed he	reto				

	(+) in:	side th	is box →											H	375	7 PC	T/US
			DE	CLAR	ATIC	N		ADDITIONAL INVENTOR(S) Supplemental Sheet									
	Nam	e of A	Addition	nal Joint In	ventor	, if any:		A petition has been filed for this unsigned inventor									
270	Given Name		Wolfga	ing ₄		Middle Initial	7	7)	Far Nar		Kla	auck	•		Sur e.g	ffix . Jr.	
0	Invent Signat	Ald	15	1							Date	Apri	April 18, 2001				
	Reside	/	State	te Ger Country Germany					ermany 🕡	DEX	Citizensl	nip	Germ	any			
	Post C	Office A	Address	Dresdeners	tr. 12								-				
	Post C	Office A	Address)							· · · · · · · · · · · · · · · · · · ·					·
	City	4067	0 Meerbu	sch	State		Ziį	р		Cour	ntry	German	у	Applica Authori			ä
	Nam	e of	Addition	, if any	:	A petition has inventor					s been file	been filed for this unsigned					
270						Middle Initial			Far Nar	nily ne	KI	ein				ffix ı. Jr.	
	Inventor's Signature			<u>L</u>	_ (\leq	2	_	·			Date	Apri		18, 2001		
<u>E</u>	Resid	ence: (City Due	esseldori		State		Ger	C	ountry	G	ermany Z	XXX	Citizens	nip	Germ	any
	Post Office Address Urdenbacher Acker 20a																
=	Post Office Address																
	City 40593 Duesseldorf Sta			State	Zip			Cour	ntry	German	У	Applica Authori	nt ty				
	Nam	:				A p inve	etition ha ntor	s been file	ed for thi	s un	signed						
7	Given Name		Wolfga	ang	,					amily Ernst				Suffix e.g. Jr.			
400	Invent Signa		1000		M				_	€ Û	20 -	yopyd	23.5	April 18, 2001			
		ence:	City Du	esseldorf /	11/	State	4	Gor	Ta	ountry	G	ermany	07 5 x	Citizensl		Germ	
			Address	Bahlenstr.	142						1		- 12 KI		_		
	Post 0	Office /	Address					-					**				
	City	4058	9 Duesse	ldorf	State		Zi	р		Cour	ntry	German	у	Applica Authori	nt ty		
	Nam	e of	Additior	nal Joint In	ventor	r, if any	:				A p	etition ha ntor	s been file	ed for thi	s un	signed	
50	Given Name		Gaby	_		Middle Initial			Far Nar		<u>Sc</u>	hilling				ffix , Jr.	
	Invent Signa	tor's ture	لمح	کی ر									Date	Apri	1 :		
	Resid	ence: (City Due	esseldorf		State	\perp	Ger	Co	ountry	G	ermany 7	EX	Citizens	nip	Germ	any
	Post 0	Office /	Address	Biker Allee	43												
	Post (Office /	Address														_
	City	4021	9 Duesse	ldorf	State		Ziį	р		Cour	atry	German	y 	Applica Authori			
	×	Addi	tional inve	ntors are bein	g named	on suppl	eme	ental shee	et(s) a	attache	ed he	reto					



4	À.
	,

(+) ins	ide thi	is box →		Ш									<u> </u>	<u> 375</u>	7 PC	<u> [/US </u>	
		С	DECLAR	ATIC)N				ADDITIONAL INVENTOR(S) Supplemental Sheet								
Nam	e of	Addition	ional Joint In	ventor	, if any	·:				A p	petition ha entor	s been file	ed for thi	s un	signed		
Given Name		Heln	nut		Middle Initial	T			mily ame	上	oth			Suf e.g	ffix . Jr.		
Inveni Signa			Elmal	dist.	B_					_		Date	Apri	1	18,	2001	
Resid	lence: (City	Essen		State	T		С	Country	G	Sermanÿ 🗍	FX	Citizensl	nip	Germa	any	
Post Office Address Broehmkenweg 24																	
Post (Office /	Address	;														
City	451	36 Esse	∍n	State		Zip	р		Cour	ntry	German	У	Applica Authori	nt ty			
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor																	
Given Name					Middle Initial				mily ame					Suf e.g.	ffix . Jr.		
Inven Signa						_				_		Date					
Resid	lence: (City			State	T	Ger	C	Country				Citizenship				
Post (Office /	Address	,														
Post 0	Office /	Address	;														
City				State		Zip	Р		Cour	ntry			Applica Authorit	nt ty			
Nam	e of	Additi	ional Joint In	ventor	, if any						etition has	s been file	ed for this	s uns	signed		
Given Name					Middle Initial	T	Family Name							Suf e.g.	fix . Jr.		
Invent Signa						_		<u> </u>		_		Date					
Resid	lence: (City			State	\Box		Cr	ountry				Citizensh	Citizenship			
Post 0	Office /	Address	,			_				_							
Post 0	Office /	Address	,							_							
City				State		Zip	2		Coun	ıtry			Applicar Authorit	nt y			
Nam	e of	Additio	ional Joint In	ventor	, if any:					A p	etition has entor	s been file	ed for this	uns	igned		
Given Name					Middle Initial	I		Fan Nar	mily me			-		Suff e.g.	ix Jr.	9	
Invent Signa						_				_		Date					
Resid	ence: (City D	Duesseldorf		State	1	Ger	Cc	ountry				Citizensh	ip			
Post 0	Office /	Address	, <u> </u>														
Post 0	Office /	Address	,			_											
City				State		Zip	, T		Coun	ıtry			Applicar Authority	nt y	_		
	Addi	tional in	ventors are being	g named	on suppl	ieme	ental she	et(s)	attachr	ad he	reto		·	-			